FEIN #:	 	_	 	 	 	

Name of Company:

ı	ine of Business & Corresponding Line from Page 19, Annual Statement		Net Direct Premium (Col. 1 less Col. 3, Page 19)		Illinois *FAIR Plan <u>Premiums</u>	Percentage <u>Applicable</u>		Taxable <u>Premium</u>
1.	Fire	1.		Less		100%		
2.	Allied Lines	2.1		Less		25%		
3.	Multiple Peril Crop	2.2				1%		
4.	Farmowners M.P.	3.				40%		
5.	Homeowners M.P.	4.		Less		40%		
6.	Commercial M.P. (non-liability)	5.1				40%		
7.	Ocean Marine	8.				15%		
8.	Inland Marine	9.				15%		
9.	Earthquake	12.				25%		
10.	Private Pass. Auto P/Dam. TOTAL	21.1				5%		
11.	Commercial Auto P/Dam. TOTAL	21.2				5%		
12.	Aircraft (all perils)	22.				10%		
13.	Other					%		
14.	Total Taxable Premiums (carry forw	\$						
15. Fire Marshal Tax Rate								x 1%
16.	Fire Marshal Tax (carry forward to Lin	<u>\$</u>						

^{*}Do not include the FAIR Plan premiums as taxable direct premium written. The FAIR Plan will pay the Fire Marshal tax on these premiums. IL446-0124 p.2